# The Decade of Health Information Technology
## *Framework for Strategic Action*

## Overview for AHA Government Affair Meeting

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# Today's Discussion

- Overview of Framework for Strategic Action

- Envisioned National Landscape

- Key Activities Underway

# Office of the National Coordinator for Health Information Technology (ONCHIT)

- On April 27, 2004, the President issued an Executive Order creating the Office of the National Coordinator for Health Information Technology.

- On May 6th, Dr. David Brailer was appointed by the President as the National Coordinator

- In fulfilling the requirements of the Executive Order, the NC was charged with:

    - developing an industry and federal government-wide strategy for widespread adoption of health information technology

    - for translating this into substantial quality and efficiency improvements within a decade

# Vision for Consumer-centric and Information-rich Health Care

- Medical information follows the consumer so they are at the center of their care
- Clinical information is in the hands of clinicians so that it guides medical decisions
- Clinicians have appropriate access to a patients' complete treatment history, order medications with computerized systems and receive electronic reminders
- Quality initiatives result in robust performance competition
- Clinical research and care delivery can be linked together

# Barriers

- Cost and operating loss of EHRs for many physicians
- High EHR implementation failure rate
- Prohibitions on physician-hospital relationships
- High cost of adoption, implementation and work flow changes
- Limited standards adoption and nonexistent data communications network.

# Framework for Strategic Action

- Goal 1 – Inform Clinical Practice
  - Centers largely on efforts to bring EHRs directly into clinical practice.
  - Clinicians across American will have information tools when and where they need them.

- Strategies
  - Incentivize EHR adoption
  - Reduce risk of EHR investment
  - Promote EHR diffusion in rural and underserved areas

# Incentivize EHR Adoption

- The transition to safe, more consumer-friendly and regionally integrated care delivery will require shared investments in information tools and changes to current clinical practice.

- A long-term goal of supporting EHR adoption among physicians is to set a foundation for pay for performance so that our health care payment system can be transitioned from a volume-based system to a quality or performance-based system.

# Incentivize EHR Adoption (cont.)

- We identified a variety of financing options, 5 of which are under exploration:

  1. Expansion of regional grants and contracts
  2. Low rate loans or loan-guarantees
  3. Updating exceptions to Stark provisions
  4. Pay for EHR use
  5. Pay for performance

# Reduce Risk of EHR Investment

- Clinicians who purchase EHRs will want assurances that these systems will have the capabilities to meet the EHR benefits promised.

- A private sector Certification Commission for HIT (www.CCHIT.org) has been formed

- Secretary Thompson already announced that any federal financing of EHRs will be linked to certification.

# Reduce Risk of EHR Investment (cont.)

- Clinicians who purchase EHRs and who attempt to change their clinical practices and office operations face a variety of risks and all too often fail and do not realize value.

- In order to derive value, mechanisms are needed to support the EHR Purchasing Lifecycle for: selecting, negotiating, contracting, implementing, training

- Low-cost support systems and market agents are needed reduce risk, failure, and partial use of EHRs are needed.

# Framework for Strategic Action

- Goal 2 – Interconnect Clinicians
  - Will allow for the secure movement of health information so that EHRs will realize their full benefit.
  - Will allow information to be portable and to move with consumers from one point of care to another.
  - Will require an interoperable infrastructure to help clinicians get access to critical health care information when their clinical and/or treatment decisions are being made.

- Strategies
  - Foster regional collaborations
  - Develop a national health information network
  - Coordinate federal health information systems

# Foster Regional Collaborations

- Encourage local oversight of health information exchange that reflects the needs and goals of a population.
- Every American should be covered by a Regional Health Information Organization (RHIO) that will support information exchange on their behalf.
- RHIOs will:
  – Provide governance and serve as a trusted intermediary,
  – Facilitate consumer interactions,
  – Support the financial, organizational, legal, technical and clinical processes

# What is ONCHIT doing to advance RHIO development?

- <u>Clearing barriers</u> so that there are no business, legal or governance barriers to interoperability.
- <u>Creating rules and funding criteria</u> to ensure RHIOs operate in the public interest, are a source of trust for physicians and patients, and achieve quality and safety goals in the community.
- <u>Providing Federal funding</u> to increase the rate of RHIO formation through a common approach.
- <u>Provide outreach and education</u> through town hall meetings, site visits
- <u>Stimulating private sector accreditation process</u> for RHIOs so that certain benefits can be conferred to the RHIO.

# Develop a National Health Information Network (NHIN)

- A network that is highly secure and can move data where patients want it to go and prevent it from going where they don't.

- It should provide "out-of-the-box" interoperability for compatible EHRs.

- This network will accelerate regional deployment by providing the tools kits and services necessary to achieve interoperable EHRs.

- Such a national health information network must be operated in the public interest and interoperable with public health.

# Framework for Strategic Action

- Goal 3 – Personalize Care
  - Consumer-centric information helps individuals have choice, control and the ability to manage their own wellness and assists with their personal health care decisions.

- Strategies
  - Encourage use of Personal Health Records
  - Enhance informed consumer choice
  - Promote use of telehealth systems

# Framework for Strategic Action

- Goal 4 – Improve Population Health
  - Population health improvement requires the collection of timely, accurate, and detailed clinical information.
  - Population health also requires the reporting of critical findings to public health officials, clinical trials and other research, and feedback to clinicians.
- Strategies
  - Unify public health surveillance architectures
  - Streamline quality and health status monitoring
  - Accelerate research and dissemination of evidence

# Three Phases of Implementation

**Robust performance competition**
-Consumer choice
-Surveillance
-Quality/health status monitoring
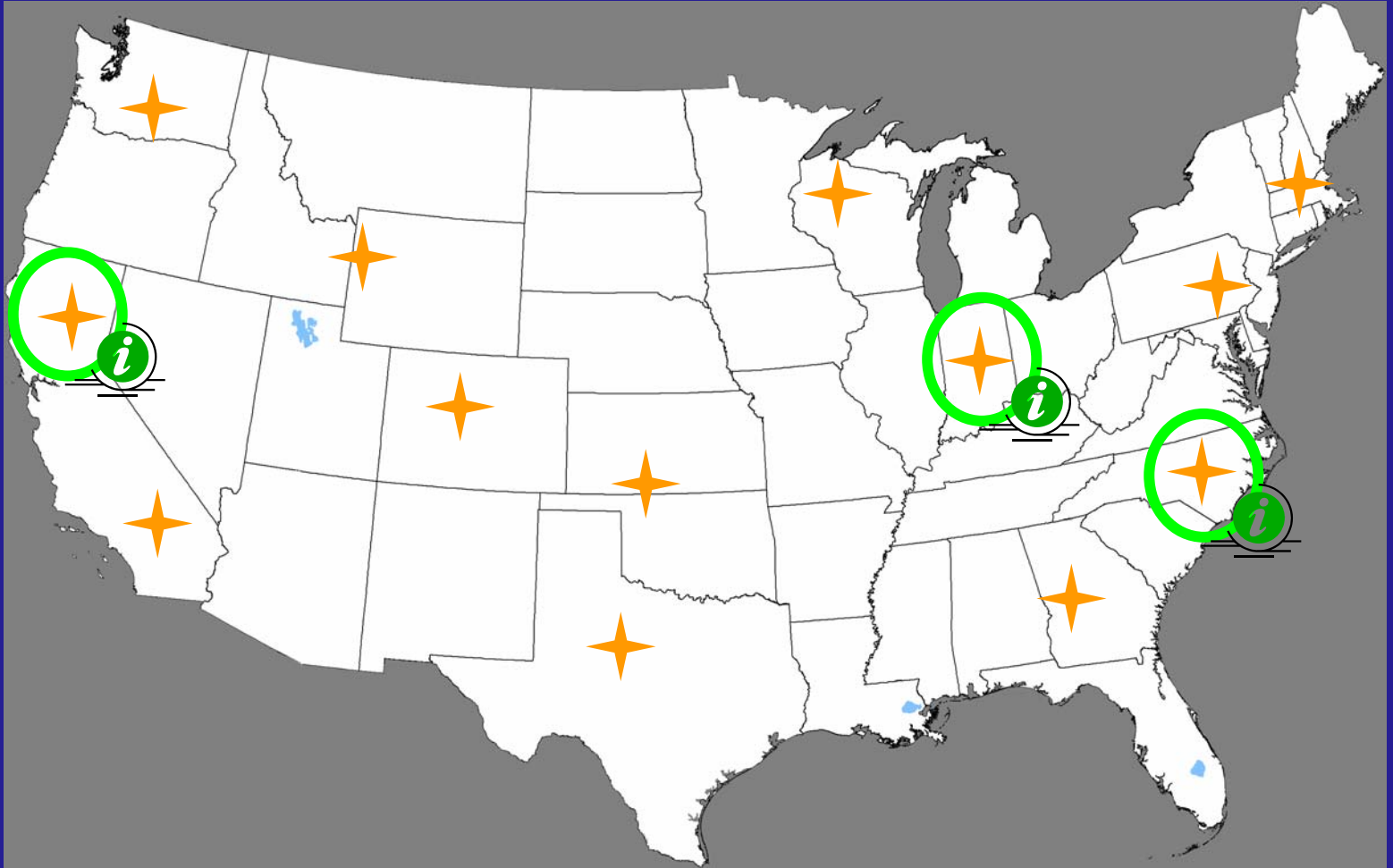
**Enhanced clinician operating capacity**
-EHR adoption
-Rural diffusion
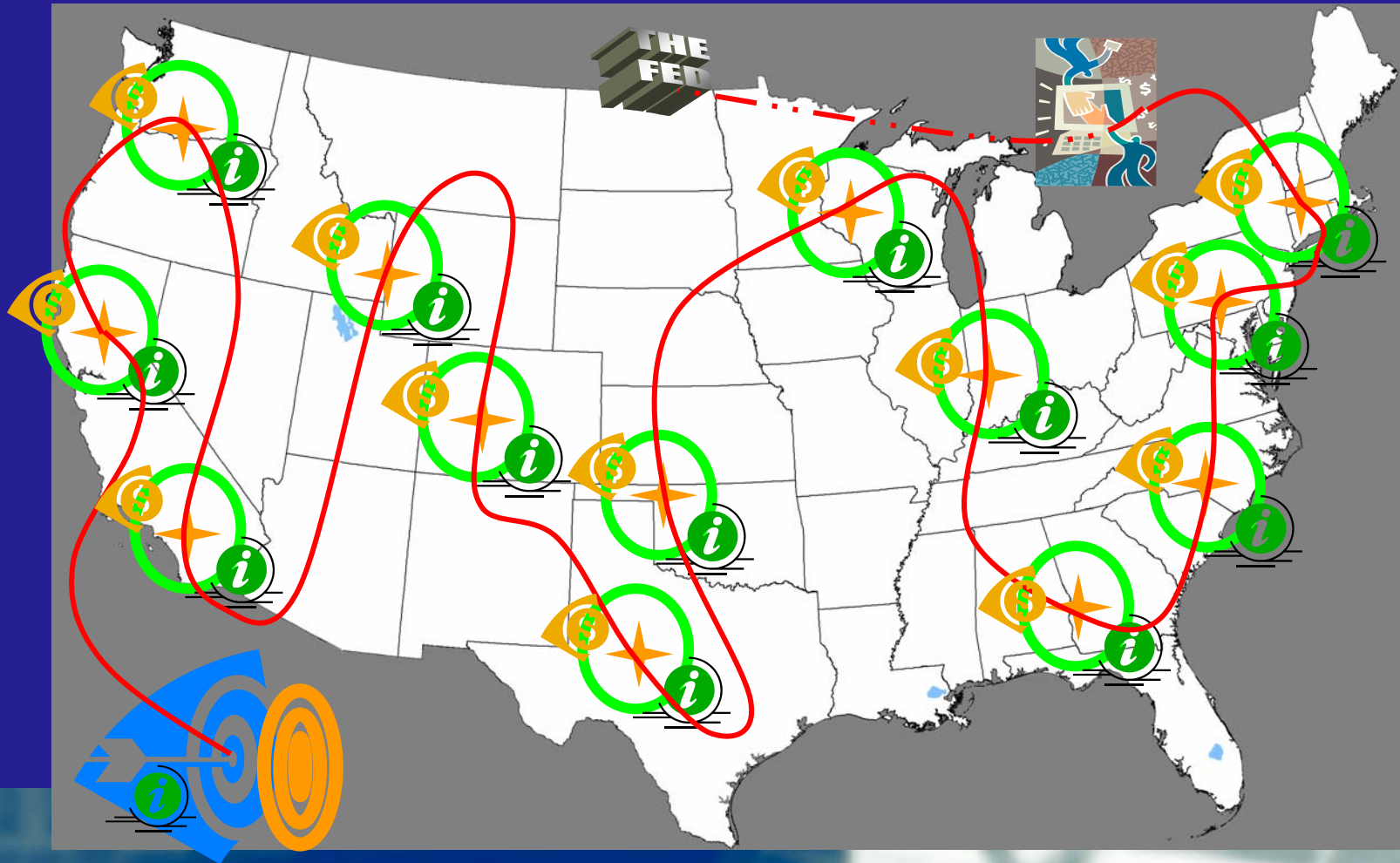-Accelerate research
-PHRs

**Functional market institutions**
-Reduce EHR risk
-Foster Regional Health Information Organizations
-Build a National Health Information network
-Develop national quality measures

2004    2005    2006    2007    2008    2009    2010    2011    2012    2013    2014

# Current National Landscape

# Envisioned National Landscape

# Other Key Actions Underway

- Health Information Technology Leadership Panel met on 11/29

- Requiring standards to facilitate ePrescribing as part of the Medicare drug benefit of 2006

- Strengthening the Federal Health Architecture and Consolidated Health Informatics initiative

# Office of the National Coordinator for HIT

## https://hhs.gov/healthit

## Sign up for the ONCHIT listserv via the website

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